

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 32388 CONTRACTOR Caribbean Fire & Security PHONE 954-581-9393

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

✓ ELECTRICAL ALARM 11687	Print Name <u>ERIC NEILINGER</u>	Signature <u>[Signature]</u>
	License #: <u>EF20000969</u>	Phone #: <u>954-581-9393</u>
MECHANICAL/ A/C _____	Print Name _____	Signature _____ Phone #: _____
PLUMBING/ GAS _____	Print Name _____	Signature _____ Phone #: _____
ROOFING _____	Print Name _____	Signature _____ Phone #: _____
SHEET METAL _____	Print Name _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER _____	Print Name _____	Signature _____ Phone #: _____
SOLAR _____	Print Name _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 32 388 CONTRACTOR Caribbean Fire & Assoc Inc (95A) 581-9993 PHONE (95A) 581-9993

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER 692	Print Name <u>Santos Santiago</u> License #: <u>W96987-0004-1996</u>	Signature <u>[Signature]</u> Phone #: <u>18006024-2281</u>
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1408-48 CONTRACTOR Gerald M Smith, Sr. PHONE 386-234-0318
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT Milton 386-984-0798

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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ELECTRICAL	Print Name <u>Rainbolt ^{TECH SRV.} Electric</u> Signature <u>[Signature]</u> License # <u>1300 1835</u> Phone # <u>386-867-1004</u>
MECHANICAL/ A/C	Print Name <u>Rainbolt ^{TECH SRV.} Electric</u> Signature <u>[Signature]</u> License # <u>RA0066590</u> Phone # <u>386-867-1004</u>
PLUMBING/ GAS	Print Name <u>Live Oak Plumbing</u> Signature _____ License # _____ Phone # <u>386-362-1767</u>
ROOFING	Print Name <u>Gerald M Smith, Sr.</u> Signature <u>[Signature]</u> License # <u>CBC 1254161</u> Phone # <u>(386-234-0318)(386-984-0798)</u>
SHEET METAL	Print Name <u>N/A</u> Signature _____ License # _____ Phone # _____
FIRE SYSTEM/ SPRINKLER	Print Name <u>Caribbean Fire</u> Signature _____ License # _____ Phone # <u>954-321-1285</u>
SOLAR	Print Name <u>N/A</u> Signature _____ License # _____ Phone # _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

(Note: A large handwritten signature and license number 'CBC 1254161' are written across the bottom half of this table.)

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1408-48 CONTRACTOR Gerald M Smith, Sr. PHONE 386-234-0318
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT RETURN 386-984-0198 *(JL)*

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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<input checked="" type="checkbox"/> ELECTRICAL 721	Print Name <u>Rainbolt ^{TEST SRV.} Electric</u>	Signature <u>[Signature]</u>
	License # <u>EC 300 1838</u>	Phone #: <u>386-867-1004</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C A 470	Print Name <u>Rainbolt Electric SRV.</u>	Signature <u>[Signature]</u>
	License #: <u>RA 00 66 590</u>	Phone #: <u>386-867-1004</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS 1429	Print Name <u>Live Date Plumbing</u>	Signature <u>[Signature]</u>
	License #: <u>CFC 1427438</u>	Phone #: <u>386-362-1764</u>
<input checked="" type="checkbox"/> ROOFING 1428	Print Name <u>Gerald M Smith, Sr.</u>	Signature <u>[Signature]</u>
	License #: <u>CBC 1254161 1254161</u>	Phone #: <u>(386-234-0318) (386-984-0198)</u>
SHEET METAL	Print Name <u>N/A</u>	Signature _____
	License #: _____	Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name <u>Caribbean Fire</u>	Signature _____
	License #: _____	Phone #: <u>954-321-1285</u>
SOLAR	Print Name <u>N/A</u>	Signature _____
	License #: _____	Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

Handwritten note: A large diagonal line is drawn across the table. Next to it, the license number 1254161 is written, with a checkmark and the number 1428 next to it.

F. S. 440.103 Building permits; Identification of minimum premium policy.—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1408-48 CONTRACTOR Gerald M Smith, Sr. PHONE 386-234-0318
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT MILTON 386-984-0198

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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ELECTRICAL	Print Name <u>Rainbolt Electric</u> License #: <u>13001835</u>	Signature <u>[Signature]</u> Phone #: <u>386-867-1004</u>
MECHANICAL/ A/C	Print Name <u>Rainbolt Electric</u> License #: <u>RA0066590</u>	Signature <u>[Signature]</u> Phone #: <u>386-867-1004</u>
PLUMBING/ GAS	Print Name <u>Live Oak Plumbing</u> License #:	Signature _____ Phone #: <u>386-362-1767</u>
ROOFING	Print Name <u>Gerald M Smith, Sr.</u> License #: <u>CBC 1254161</u>	Signature <u>[Signature]</u> Phone #: <u>(386-234-0318) (386-984-0198)</u>
SHEET METAL	Print Name <u>N/A</u> License #:	Signature _____ Phone #:
FIRE SYSTEM/ SPRINKLER	Print Name <u>Caribbean Fire</u> License #: <u>69698700011996</u>	Signature <u>[Signature]</u> Phone #: <u>954-321-1285</u>
SOLAR	Print Name <u>N/A</u> License #: <u>EF 20000969</u>	Signature _____ Phone #:

Specialty License	License Number	Sub-Contractors Printed Name	Sub Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
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